



PART OF THE MEMORIAL NETWORK

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February 22, 2018

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HEALTH FACILITIES &
SERVICES REVIEW BOARD

Ms. Courtney Avery
Executive Secretary
Illinois Health Facilities
Planning Board
525 West Jefferson
Springfield, IL 62761

**RE: Final Realized Cost Report
Memorial Hospital-East
Shiloh, Illinois
Project 16-018**

Dear Ms. Avery:

Please be advised that the above-referenced project was completed and opened on October 23, 2017; and that it was completed consistent with all terms of the Permit, including the project's costs and sources of funds, as approved by the State Board. Attached are: 1) a comparison the approved costs and funding to those incurred, and 2) confirmation of the final payment.

Please be advised that the undersigned hereby certify that:

- the identified costs are the total costs required to complete the project;
- there are no additional or associated costs or capital expenditures related to the project
- The project has been completed consistent with the Permit, including the project's cost and square footage.

Attached are an itemization of the project's costs and a final Application and Certification for Payment for the construction contract.

Sincerely,

Mark J. Turner
President

Notarized:

Carol A. Musser 2/22/18



**Comparison of Approved Project Costs and Sources of Funds
to
Realized Project Costs and Sources of Funds to be Submitted for Reimbursement
under Title XVIII and XIX**

	Approved per Permit	Realized Amount
Project Costs:		
Preplanning Costs	\$90,000	\$29,140
Site Survey & Soil Investigation	\$7,500	\$32,190
Site Preparation	\$720,000	\$622,467
Off Site Work	\$300,000	\$ -
New Construction Contracts	\$16,249,091	\$16,144,645
Construction Contingency	\$1,190,985	\$ -
Architectural/Engineering Fees	\$1,250,000	\$269,040
Consulting & Other Fees	\$1,482,000	\$928,550
Movable Equipment	\$3,757,061	\$2,586,156
	\$25,046,637	\$20,612,188
Sources of Funds:		
Cash and Securities	\$25,046,637	

*Building was opened for business 10/23/17

REQUEST FOR PAYMENT

From: Holland Construction Services
4495 North Illinois Street
Swansea, IL 62226

To: BJC HealthCare
8300 Eager Rd. Ste 600C
Planning Design & Construction
Saint Louis, MO 63144

Invoice:
Draw:
Invoice date: 2/20/2018
Period ending date: 2/19/2018

Contract For:

Request for payment:

Original contract amount \$10,589,794.28
Approved changes \$4,510,331.18
Revised contract amount \$15,100,125.46

Project: 16-017.G0
Memorial MOB
Contract date: 9/28/2016
Architect: Archimages, Inc

Contract completed to date \$15,100,125.46
Add-ons to date \$0.00
Taxes to date \$0.00
Less retainage \$0.00
Total completed less retainage \$15,100,125.46
Less previous requests \$13,176,071.15
Current request for payment \$1,924,054.31

Current billing \$581,302.78
Current additional charges \$0.00
Current tax \$0.00
Less current retainage -\$1,342,751.53
Current amount due \$1,924,054.31
Remaining contract to bill \$0.00

ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising this application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED

\$

(Attach explanation if amount certified differs from the amount applied for.)

By: _____ Date: _____

This certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor name herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Changes approved in previous months by Owner	4,141,358.00	
Total approved this Month	368,973.18	
TOTALS	4,510,331.18	
NET CHANGES by Change Order	4,510,331.18	

I hereby certify that the work performed and the materials supplied to date, as shown on the above represent the actual value of the accomplishment under the terms of the Contract (and all authorized changes thereof) between the undersigned and the BJC HealthCare relating to the above referenced project. I also certify that the contractor has paid all amounts previously billed and paid by the owner.

CONTRACTOR : Holland Construction Services

State Of IL

County Of St. Clair

By: _____

Subscribed and sworn to before me this _____ day of _____.

Date: _____

Notary Public

My commission expires: _____

REQUEST FOR PAYMENT DETAIL

Project: 16-017.G0 / Memorial MOB

Invoice: *DRAFT*

Draw: *DRAFT*

Period Ending Date: 2/19/2018 Detail Page 2 of 3 Pages

Item ID	Description	Original Contract Amount	Contract Changes (+/-)	Total Contract Amount	Previously Completed Work	Work Completed This Period	Presently Stored Materials	Completed And Stored To Date	% Comp	Balance To Finish	Retainage Balance
10	General Conditions	868,570.00	200,000.00	1,068,570.00	1,068,570.00			1,068,570.00	100.00		
20	Preconstruction	94,349.00	0.00	94,349.00	94,349.00			94,349.00	100.00		
30	Design Build Fee - Prof'l Svcs	621,192.00	0.00	621,192.00	621,192.00			621,192.00	100.00		
40	Sitework Engineering/Layout	49,200.98	0.00	49,200.98	47,530.67	1,670.31		49,200.98	100.00		
50	Concrete	1,031,861.56	0.00	1,031,861.56	917,880.50	113,981.06		1,031,861.56	100.00		
60	Masonry	273,239.44	0.00	273,239.44	268,834.91	4,404.53		273,239.44	100.00		
70	Steel	1,057,984.60	0.00	1,057,984.60	1,051,243.35	6,741.25		1,057,984.60	100.00		
80	Rough Carpentry	115,175.36	0.00	115,175.36	114,159.59	1,015.77		115,175.36	100.00		
90	Batt Insulation	28,744.00	0.00	28,744.00	7,944.65	20,799.35		28,744.00	100.00		
100	Fireproofing	73,109.00	0.00	73,109.00	73,109.00			73,109.00	100.00		
110	Air Barrier	23,671.00	0.00	23,671.00	23,671.00			23,671.00	100.00		
120	Wall Panels	200,995.00	0.00	200,995.00	200,995.00			200,995.00	100.00		
130	Roofing	213,516.00	0.00	213,516.00	192,907.89	20,608.11		213,516.00	100.00		
140	Siding	241,200.00	0.00	241,200.00	241,200.00			241,200.00	100.00		
150	Firestopping	36,430.00	0.00	36,430.00	36,430.00			36,430.00	100.00		
160	Caulking & Sealants	89,833.00	0.00	89,833.00	81,978.78	7,854.22		89,833.00	100.00		
170	Doors & Windows	72,201.00	0.00	72,201.00	72,201.00			72,201.00	100.00		
180	Glazing	491,679.00	0.00	491,679.00	491,679.00			491,679.00	100.00		
190	Drywall	545,894.50	0.00	545,894.50	545,894.50			545,894.50	100.00		
200	Flooring	130,299.00	0.00	130,299.00	95,703.00	34,596.00		130,299.00	100.00		
210	Painting	47,214.00	0.00	47,214.00	47,214.00			47,214.00	100.00		
220	Toilet Accessories	27,053.00	0.00	27,053.00	27,053.00			27,053.00	100.00		
230	Floor Mats & Frames	5,318.93	0.00	5,318.93	5,318.93			5,318.93	100.00		
240	Elevators	213,666.00	0.00	213,666.00	213,666.00			213,666.00	100.00		
250	Fire Suppression	114,789.00	0.00	114,789.00	114,130.00	659.00		114,789.00	100.00		
260	Plumbing	156,500.00	0.00	156,500.00	156,500.00			156,500.00	100.00		
270	HVAC	858,098.00	0.00	858,098.00	858,098.00			858,098.00	100.00		
280	Electrical	868,704.00	0.00	868,704.00	868,704.00			868,704.00	100.00		
290	Earthwork	318,017.00	0.00	318,017.00	318,017.00			318,017.00	100.00		
300	Soil Treatment	4,500.00	0.00	4,500.00	4,500.00			4,500.00	100.00		
310	Soil Stabilization	157,236.00	0.00	157,236.00	157,236.00			157,236.00	100.00		
320	Aggregate	132,960.00	0.00	132,960.00	132,960.00			132,960.00	100.00		
330	Asphalt	396,850.00	0.00	396,850.00	396,850.00			396,850.00	100.00		
340	Irrigation	27,655.00	0.00	27,655.00	27,655.00			27,655.00	100.00		
350	Landscaping	127,678.00	0.00	127,678.00	127,678.00			127,678.00	100.00		
360	Utilities	153,098.91	0.00	153,098.91	153,098.91			153,098.91	100.00		
370	Contingency	295,347.00	0.00	295,347.00	295,347.00			295,347.00	100.00		
380	Fee	425,965.00	0.00	425,965.00	425,965.00			425,965.00	100.00		
385	Interior Fit-Out Fee	0.00	170,056.00	170,056.00	170,056.00			170,056.00	100.00		

REQUEST FOR PAYMENT DETAIL

Project: 16-017.G0 / Memorial MDB

Invoice: *DRAFT*

Draw: *DRAFT*

Period Ending Date: 2/19/2018 Detail Page 3 of 3 Pages

Item ID	Description	Original Contract Amount	Contract Changes (+/-)	Total Contract Amount	Previously Completed Work	Work Completed This Period	Presently Stored Materials	Completed And Stored To Date	% Comp	Balance To Finish	Retainage Balance
390	Outpatient Lab	0.00	194,733.00	194,733.00	194,733.00			194,733.00	100.00		
400	Imaging	0.00	293,131.00	293,131.00	293,131.00			293,131.00	100.00		
410	Ortho	0.00	333,128.00	333,128.00	333,128.00			333,128.00	100.00		
420	Specialty	0.00	312,309.00	312,309.00	312,309.00			312,309.00	100.00		
430	Primary Care	0.00	655,439.00	655,439.00	655,439.00			655,439.00	100.00		
440	OBGYN	0.00	701,298.00	701,298.00	701,298.00			701,298.00	100.00		
450	Women's Center	0.00	603,102.00	603,102.00	603,102.00			603,102.00	100.00		
460	Physical Therapy	0.00	607,162.00	607,162.00	607,162.00			607,162.00	100.00		
470	Wireless Security Camera	0.00	0.00								
480	Change Order #2	0.00	71,000.00	71,000.00	71,000.00			71,000.00	100.00		
490	Adjust Parking Lot Grade	0.00	344,202.36	344,202.36		344,202.36		344,202.36	100.00		
500	Added Auto Operator in PTDT	0.00	9,328.77	9,328.77		9,328.77		9,328.77	100.00		
510	Added Rated Ceiling in OB	0.00	10,738.64	10,738.64		10,738.64		10,738.64	100.00		
520	Added Casework in PTOT	0.00	4,703.41	4,703.41		4,703.41		4,703.41	100.00		

Totals	10,589,794.28	4,510,331.18	15,100,125.46	14,518,822.68	581,302.78		15,100,125.46	100.00		
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REQUEST FOR PAYMENT

From: Holland Construction Services
4495 North Illinois Street
Swansea, IL 62226

To: BJC HealthCare
8300 Eager Rd. Ste 600C
Planning Design & Construction
Saint Louis, MO 63144

Invoice:
Draw:
Invoice date: 2/20/2018
Period ending date: 2/19/2018

Contract For:

Architect:

Request for payment:

Original contract amount \$1,044,520.00
Approved changes \$0.00
Revised contract amount \$1,044,520.00

Contract completed to date \$1,044,520.00

Less retainage \$0.00

Total completed less retainage \$1,044,520.00

Less previous requests \$987,651.59

Current request for payment \$56,868.41

Current billing \$56,868.41

Less current retainage \$0.00

Current amount due \$56,868.41

Remaining contract to bill \$0.00

Contract date:

Project: 17-021.G0

Memorial MOB-Lincoln Surgical

ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising this application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED

\$

(Attach explanation if amount certified differs from the amount applied for.)

By: _____ Date: _____

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Changes approved in previous months by Owner		
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TOTALS		
NET CHANGES by Change Order		

I hereby certify that the work performed and the materials supplied to date, as shown on the above represent the actual value of the accomplishment under the terms of the Contract (and all authorized changes thereof) between the undersigned and the BJC HealthCare relating to the above referenced project. I also certify that the contractor has paid all amounts previously billed and paid by the owner.

CONTRACTOR: Holland Construction Services

State Of IL

County Of St. Clair

By: _____

Subscribed and sworn to before me this _____ day of _____,

Date: _____

Notary Public

My commission expires:

REQUEST FOR PAYMENT DETAIL

Project: 17-021.G0 / Memorial MOB-Lincoln Surgic

Invoice: *DRAFT*

Draw: *DRAFT*

Period Ending Date: 2/19/2018

Detail Page 2 of 2 Pages

Item ID	Description	Total Contract Amount	Previously Completed Work	Work Completed This Period	Presently Stored Materials	Completed And Stored To Date	% Comp	Balance To Finish	Retainage Balance	Retainage This Period	Current Amount Due
10	GENERAL CONDITIONS	30,977.00	30,977.00			30,977.00	100.00				
20	STRUCTURAL STEEL	13,515.00	13,515.00			13,515.00	100.00				
30	ROUGH CARPENTRY	55,353.00	55,353.00			55,353.00	100.00				
40	FINISH CARPENTRY	70,002.00	60,613.00	9,389.00		70,002.00	100.00				9,389.00
50	DOORS/FRAMES/HARDWARE	37,536.00	37,536.00			37,536.00	100.00				
60	DRYWALL/METAL STUDS/ACT	145,155.00	145,155.00			145,155.00	100.00				
70	FLOORING	62,425.00	62,425.00			62,425.00	100.00				
80	MOISTURE MITIGATION	44,625.00	18,000.00	26,625.00		44,625.00	100.00				26,625.00
90	INTERIOR ACCESSORIES	7,811.00	7,811.00			7,811.00	100.00				
100	PAINTING	18,264.00	18,264.00			18,264.00	100.00				
110	FIREPROOFING	5,820.00	5,820.00			5,820.00	100.00				
120	FIRESTOPPING	27,195.00	27,195.00			27,195.00	100.00				
130	MECHANICAL	99,418.00	99,418.00			99,418.00	100.00				
140	GLAZING	3,438.00	840.82	2,597.18		3,438.00	100.00				2,597.18
150	ELECTRICAL	279,903.00	261,645.77	18,257.23		279,903.00	100.00				18,257.23
160	PLUMBING	73,625.00	73,625.00			73,625.00	100.00				
170	FIRE PROTECTION	24,567.00	24,567.00			24,567.00	100.00				
180	FEE	44,891.00	44,891.00			44,891.00	100.00				

Totals	1,044,520.00	987,651.59	56,868.41			1,044,520.00	100.00			0.00	56,868.41
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